Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 1 of 47

| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | | Identify Yourself | | |
|---------|-------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar licer Brin- iden | e the name that is on a government-issued ure identification (for mple, your driver's use or passport). If your picture tification to your sting with the trustee. | Crystal First name G Middle name Madrid Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-7468 | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 2 of 47 Case number (if known)

Debtor 1 Crystal G Madrid

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs. Business name(s) | | | |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| oyer Identification pers (EIN) you have in the last 8 years le trade names and | ■ I have not used any business name or EINs. Business name(s) | | | | |
| | EINS | EINS | | | |
| e you live | 5217 W Cornelia, Bsmt Apt | If Debtor 2 lives at a different address: | | | |
| | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | County | | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| listrict to file for | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | e you live you are choosing listrict to file for ruptcy | business names and oper Identification pers (EIN) you have in the last 8 years let trade names and business as names Business name(s) Business name(s) EINs Business name(s) EINs State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. | | | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 3 of 47

Case number (if known) Debtor 1 Crystal G Madrid

| ar | t 2: Tell the Court About | Your E | Bankruptcy Ca | ise | | | | |
|------------|------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------|-------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | n of each, see <i>Notice Required</i> of page 1 and check the approp | by 11 U.S.C. § 342(b) for Individuals I riate box. | Filing for Bankruptcy | |
| | choosing to file under | Chapter 7 | | | | | | |
| | | | Chapter 11 | | | | | |
| | | | Chapter 12 | | | | | |
| | | | Chapter 13 | | | | | |
| | | | · | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Ty attorney is sub | pically, if you are paying the fee | heck with the clerk's office in your loca e yourself, you may pay with cash, cas behalf, your attorney may pay with a cr | shier's check, or money | |
| | | | | | stallments. If you choose this outs (Official Form 103A). | option, sign and attach the Application | for Individuals to Pay | |
| | | | but is not requapplies to you | uired to, waive ur family size a | your fee, and may do so only ind you are unable to pay the fe | otion only if you are filing for Chapter 7 f your income is less than 150% of the see in installments). If you choose this conficial Form 103B) and file it with your | official poverty line that option, you must fill out | |
|) . | Have you filed for bankruptcy within the | ■ N | lo. | | | | | |
| | last 8 years? | ΠY | es. | | | | | |
| | | | District | | | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ■ N | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ПΥ | es. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if know | vn | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if know | vn | |
| 11. | Do you rent your | □N | lo. Go to li | ine 12. | | | | |
| | residence? | ■ Y | As Has yo | ur landlord obt | ained an eviction judgment aga | ainst you and do you want to stay in yo | our residence? | |
| | | _ ' | E 5. | No. Go to line | : 12. | | | |
| | | | _ | | nitial Statement About an Evicti | ion Judgment Against You (Form 101A | and file it with this | |
| | | | | , , , , | | | | |

Document Page 4 of 47 Case number (if known) Debtor 1 Crystal G Madrid Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 5 of 47

Debtor 1 Crystal G Madrid Document Page

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 47 Case number (if known) Debtor 1 Crystal G Madrid Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Crystal G Madrid Signature of Debtor 2 Crystal G Madrid Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on June 25, 2016

MM / DD / YYYY

Debtor 1 Crystal G Madrid Document Page 7 of 47 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Robert J Skowronski | Date | June 25, 2016 |
|-----------------------------------------|---------------|------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Robert J Skowronski | | |
| Printed name | | |
| Law Offices of Robert J Skowronski, Ltd | | |
| 5491 N. Milwaukee Ave | | |
| Chicago, IL 60630 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (773) 283-1600 | Email address | rbskowronski@gmail.com |
| 6290776 | | |
| Day number 9 Ctata | | |

| | | Docume | ent Page 8 of 47 | |
|--------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Crystal G Madrid | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | |
| , | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as | ssets of what you own |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 21,250.09 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 21,250.09 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 22,114.00 |
| | Your total liabilities | \$ | 22,114.00 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,207.46 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,423.94 |
| Pai | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 06/25/16 20:22:17 Case 16-20721 Doc 1 Filed 06/25/16 Desc Main Document

Page 9 of 47
Case number (if known) Debtor 1 Crystal G Madrid

| From the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$_ | 1,182.71 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------|
| | 1 - | |

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total claim | |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| Trom rait 4 on ocheane Er, copy the following. | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | | <u> Document</u> | Page 10 of 4 | | | |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| his inforn | nation to identify your | case and th | is filing: | | | | |
| 1 | Crystal G Madrid | 1 | | | | | |
| | First Name | | Name | Last Name | | | |
| 2 | | | | | | | |
| if filing) | First Name | Middle | Name | Last Name | | | |
| States Bar | nkruptcy Court for the: | NORTHER | N DISTRICT OF I | LLINOIS | | | |
| | | | | | | | |
| umber _ | | | | | | | ☐ Check if this is an |
| | | | | | | | amended filing |
| | | | | | | | |
| ial Fo | rm 106A/B | | | | | | |
| odul | o A/R: Prop | ortv | | | | | 40/45 |
| | | | | | | | 12/15 |
| its best. Be ion. If more | e as complete and accura e space is needed, attach | ate as possible | e. If two married pe | eople are filing together, bo | th are equally res | ponsible for sup | plying correct |
| Describe I | Each Residence, Building | g, Land, or Oth | າer Real Estate Yoເ | u Own or Have an Interest I | n | | |
| u own or h | ave any legal or oquitable | le interest in a | ny residence build | ling land or similar proper | tv? | | |
| u own or n | lave ally legal of equitable | ie iliterest ili ai | ly residence, build | illig, ialiu, oi silliliai propei | ty: | | |
| . Go to Part | 2. | | | | | | |
| s. Where is | s the property? | | | | | | |
| | | | | | | | |
| Describe \ | Your Vehicles | | | | | | |
| , vans, tru | ucks, tractors, sport u | tility vehicles | s, motorcycles | | | | |
| Maka: N | Nicean | \A/I- | a has an interest i | in the property? Observe | Do not de | educt secured clai | ms or exemptions. Put |
| - | | | | III the property? Check one | | | |
| viouci. | | | , | | Creditors | WIIO Have Claim | s secured by Property. |
| _ | | | | or 2 only | | | Current value of the portion you own? |
| | | | | | оо р. | - poy . | pormon you on |
| | | | 711 10401 0110 01 1110 0 | addition and another | | | |
| | | | | mmunity property | | \$5,064.00 | \$5,064.00 |
| | | | (see instructions) | | | | |
| | | | | | | es | |
| the dolla es you ha | | e. Write that n | number here | es from Part 2, including | | => | \$5,064.00 |
| | ial Fo edule ategory, sets best. Be on. If more every ques Describe u own or h Go to Part s. Where is Describe own, lease e else driv y, vans, tru s Make: Model: Gear: Approximate Other inform | Crystal G Madric First Name States Bankruptcy Court for the: umber Call Form 106A/B Calle A/B: Property Integory, separately list and describes best. Be as complete and accuron. If more space is needed, attacked every question. Describe Each Residence, Building under own or have any legal or equitable. Go to Part 2. So Where is the property? Describe Your Vehicles Cown, lease, or have legal or equitable else drives. If you lease a vehicle, vans, trucks, tractors, sport under the complex of the complex | Trist Name Middle Trist Name Middle States Bankruptcy Court for the: NORTHERI Morther Morth | First Name Middle Name States Bankruptcy Court for the: NORTHERN DISTRICT OF Interest in any residence, building, Land, or Other Real Estate You wown or have any legal or equitable interest in any residence, building, Land, or Other Real Estate You wown, lease, or have legal or equitable interest in any vehicle else drives. If you lease a vehicle, also report it on Schedule (var., vans, trucks, tractors, sport utility vehicles, motorcycles of the county of th | Tries information to identify your case and this filling: Crystal G Madrid | Trystal G Madrid First Name Middle Name Last Name | Trist Name Middle Name Last Name Las |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 16-20721 Filed 06/25/16 Entered 06/25/16 20:22:17 Page 11 of 47

Case number (if known) Document Debtor 1 **Crystal G Madrid** Yes. Describe..... \$200.00 Basic used household goods and furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$400.00 Basic used electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Basic used clothing \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 Basic used jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$800.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Doc 1

Current value of the portion you own? Do not deduct secured

Desc Main

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Page 12 of 47

Case number (if known) Document Debtor 1 Crystal G Madrid claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$25.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking account ending in 3635 Fifth Third Bank \$355.42 17.1. Savings account Fifth Third Bank \$205.67 ending in 6523 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

| | Case 16-2072 | 21 Doc | | | | 5/16 20:22:17 | Desc Main |
|----------------------|--------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------|------------|-----------------------------|---------------------------|-----------------------------------------------------------------------------------|
| Debtor 1 | Crystal G Madrid | | Docum | EIIL | Page 13 of 47 _{Ca} | ase number (if known) | |
| ☐ Ye | s. Give specific informat | ion about the | m | | | | |
| | nts, copyrights, tradem mples: Internet domain na | • | • | | | S | |
| | s. Give specific informat | ion about the | m | | | | |
| Exal ■ No | nses, franchises, and omples: Building permits, es. Give specific informat | exclusive lice | nses, cooperative a | ssociatio | n holdings, liquor license | es, professional licens | es |
| Money o | or property owed to you | 1? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | refunds owed to you s. Give specific information | on about the | m, including whether | r you alre | ady filed the returns and | I the tax years | |
| Exal □ No - | ly support mples: Past due or lump s. Give specific information | , | , spousal support, cl | hild supp | ort, maintenance, divorc | e settlement, property | settlement |
| | | | Approximate chi 12 year old c | | ort arrearages for | Child support | \$14,000.00 |
| | | | Approximate chi 2 year old ch | | ort arrearages for | Child support | \$800.00 |
| Exa | ′ ' | sability insura oans you ma | ince payments, disa de to someone else | bility ben | efits, sick pay, vacation | pay, workers' comper | nsation, Social Security |
| | ests in insurance polici mples: Health, disability, | | nce; health savings a | account (| HSA); credit, homeowne | er's, or renter's insurar | nce |
| ■ Ye | s. Name the insurance co | ompany of ea Company na | | value. | Beneficiary | : | Surrender or refund value: |
| | | | Insurance Agend - No Cash Value | cy - Te | rm Children | | \$0.00 |
| If yo som ■ No | interest in property that u are the beneficiary of a eone has died. s. Give specific informat | ı living trust, e | | | | urrently entitled to rece | eive property because |
| Exal ■ No | ns against third parties mples: Accidents, employ s. Describe each claim | ment dispute | | | | or payment | |

| | Case 16-20721 | Doc 1 | Filed 06/25/16 | | 6/25/16 20:22:17 | Desc Main |
|--------------|------------------------------------------------------------------------|-----------------|-----------------------------------------|-----------------------|-----------------------------|-------------------------|
| Debt | or 1 Crystal G Madrid | | Document | Page 14 of | Case number (if known) | |
| | ther contingent and unliquidated No Yes. Describe each claim | claims of o | every nature, including | g counterclaims | of the debtor and rights to | o set off claims |
| 35 Δ | ny financial assets you did not al | lready list | | | | |
| | No Yes. Give specific information | roddy not | | | | |
| 36. | Add the dollar value of all of your for Part 4. Write that number here | | | | | \$15,386.09 |
| Part : | Describe Any Business-Related Pr | roperty You (| Own or Have an Interest I | n. List any real esta | ate in Part 1. | |
| 37. D | you own or have any legal or equitab | ble interest in | n any business-related pr | operty? | | |
| _ | No. Go to Part 6. | | , , , , , , , , , , , , , , , , , , , , | | | |
| | Yes. Go to line 38. | | | | | |
| | | | | | | |
| Part (| Describe Any Farm- and Commerc If you own or have an interest in farm | | | n or Have an Interes | st In. | |
| 46. C | o you own or have any legal or e | quitable int | erest in any farm- or o | ommercial fishir | ng-related property? | |
| I | No. Go to Part 7. | | | | | |
| I | Yes. Go to line 47. | | | | | |
| | | | | | | |
| Part 1 | Describe All Property You Ow | /n or Have ar | n Interest in That You Did | Not List Above | | |
| | o you have other property of any | | | | | |
| | Examples: Season tickets, country c | lub membe | rship | | | |
| | Yes. Give specific information | | | | | |
| | • | | | | | |
| 54. | Add the dollar value of all of your | r entries fro | om Part 7. Write that no | umber here | | \$0.00 |
| | | | | | | |
| Part 8 | List the Totals of Each Part of t | this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | | | \$5,064.00 | | |
| 57. | Part 3: Total personal and housel | hold items | , line 15 | \$800.00 | | |
| | Part 4: Total financial assets, line | | | \$15,386.09 | | |
| 59. | Part 5: Total business-related pro | | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-rel | | | \$0.00 | | |
| 61. | Part 7: Total other property not lis | sted, line 5 | 4 + | \$0.00 | | |
| 62. | Total personal property. Add lines | s 56 through | ı 61 | \$21,250.09 | Copy personal property t | otal \$21,250.09 |
| 63. | Total of all property on Schedule | A/B. Add li | ne 55 + line 62 | | | \$21,250.09 |

Official Form 106A/B Schedule A/B: Property page 5

| | | 1700.111110. | | |
|-----------------------------------------|-------------------------|-------------------------------|-----------|--|
| Fill in this inform | nation to identify your | case: | | |
| Debtor 1 | Crystal G Madrid | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|-----------------------------------------|-----------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| \$5,064.00 | | \$2,664.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$5,064.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$100.00 | | | 735 ILCS 5/12-1001(a) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| | \$5,064.00 \$5,064.00 \$400.00 | \$5,064.00 | Check only one box for each exemption. \$5,064.00 \$5,064.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,400.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$2,00.00 \$3,00.00 \$4,00.00 \$4,00.00 \$4,00.00 \$4,00.00 \$1,00% of fair market value, up to any applicable statutory limit | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 16 of 47

| btor 1 Crystal G Madrid | | | Case number (if known) | |
|----------------------------------------------------------------------------------------|--------------------------------------|---------|-----------------------------------------------------------------|--------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | Specific laws that allow exemption | |
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| Basic used jewelry Line from Schedule A/B: 12.1 | \$100.00 | • | \$100.00 | 735 ILCS 5/12-1001(b) |
| Ellie II olii oonidaale /v.b. 1=11 | | | 100% of fair market value, up to any applicable statutory limit | |
| Cash Line from Schedule A/B: 16.1 | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking account ending in 3635: Fifth Third Bank | \$355.42 | | \$355.42 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Savings account ending in 6523: Fifth Third Bank | \$205.67 | | \$205.67 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Child support: Approximate child support arrearages for 12 year old | \$14,000.00 | | | 735 ILCS 5/12-1001(g)(4) |
| child | | | 100% of fair market value, up to | |
| Line from Schedule A/B: 29.1 | | | any applicable statutory limit | |
| Child support: Approximate child support arrearages for 2 year old | \$800.00 | | | 735 ILCS 5/12-1001(g)(4) |
| child Line from Schedule A/B: 29.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Fifth Third Insurance Agency - Term nsurance - No Cash Value | \$0.00 | | | 735 ILCS 5/12-1001(f) |
| Beneficiary: Children Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Are you claiming a homestead exemption | | | lad on an offer the date of a first- | *) |
| Subject to adjustment on 4/01/19 and every No | o years after that for ca | ases II | ied on or after the date of adjustmen | ii. <i>)</i> |
| ☐ Yes. Did you acquire the property cover | red by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| □ No | | | | |
| □ V | | | | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 17 of 47

| Fill in this infor | | | | |
|-----------------------------------------|------------------|-------------------|-------------|--------------------------------------|
| Debtor 1 | Crystal G Madrid | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | Case | 10-20121 L | | Document | Page 18 | R of 17 | Desc Main | |
|------------------------|------------------------------------------------------------|----------------------------------------------------|-------------------------------------|---------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------|
| Fill in t | his informatior | to identify your c | | 7. A.A. HIII I II | 1 7777. 11 | | | |
| Debtor | 1 C r | ystal G Madrid | | | | | | |
| 200.0. | | t Name | Middle Na | me | Last Name | | | |
| Debtor | | | | | | | | |
| (Spouse if | f, filing) Firs | t Name | Middle Na | me | Last Name | | | |
| United : | States Bankrupt | cy Court for the: | NORTHERN | DISTRICT OF ILL | LINOIS | | | |
| Case n | umber | | | | | | | |
| (if known) | | | | - | | | ☐ Check if this is a | an |
| | | | | | | | amended filing | |
| O.C | | OF /F | | | | | | |
| | al Form 10 | | | | OI - ' | | 404 | - |
| | | Creditors W | | | | Part 2 for creditors with NONPRIC | 12/1 | |
| Schedule eft. Attac | e D: Creditors Wh ch the Continuati d case number (i | no Have Claims Section Page to this page f known). | ired by Propert e. If you have n | y. If more space is o information to rep | needed, copy t | any creditors with partially secur the Part you need, fill it out, numl do not file that Part. On the top of | ber the entries in the boxe | es on the |
| Part 1: | List All of Y | our PRIORITY Un | secured Clair | ns | | | | |
| 1. Do a | any creditors hav | e priority unsecured | d claims agains | t you? | | | | |
| I | No. Go to Part 2. | | | | | | | |
| | Yes. | | | | | | | |
| Part 2: | List All of Y | our NONPRIORIT | Y Unsecured | Claims | | | | |
| 3. Do a | any creditors hav | e nonpriority unsec | ured claims ag | ainst you? | | | | |
| | No. You have noth | ing to report in this pa | art. Submit this f | orm to the court with | your other sche | edules. | | |
| | Yes. | | | | | | | |
| unse | ecured claim, list to n one creditor hold | he creditor separately | for each claim. | For each claim listed | I, identify what t | wholds each claim. If a creditor hat ype of claim it is. Do not list claims three nonpriority unsecured claims | already included in Part 1. I | If more |
| | | | | | | | Total claim | |
| 4.1 | Comcast PA | | | Last 4 digits of acc | ount number | 3517 | \$ | \$535.00 |
| | Nonpriority Credi | | | | | | | |
| | PO Box 3002 | <u>?</u> n, PA 19398-300 | | When was the debt | incurred? | 09/2014 | | |
| | | ity State Zlp Code | | As of the date you | file, the claim i | s: Check all that apply | | |
| | Who incurred th | e debt? Check one. | | - | • | 11,7 | | |
| | ■ Debtor 1 only | | | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | | | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and | Debtor 2 only | | ☐ Disputed | | | | |
| | ☐ At least one o | f the debtors and ano | | Type of NONPRIOR | RITY unsecured | d claim: | | |
| | _ | claim is for a comn | | ☐ Student loans | | | | |
| | debt | | • | | | ration agreement or divorce that yo | ou did not | |
| | Is the claim sub | ject to offset? | | report as priority clai | | | | |
| | No | | | - | • | g plans, and other similar debts | | |
| | ☐ Yes | | | Other. Specify | Utility bill | | | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 19 of 47

Debtor 1 Crystal G Madrid Case number (if know) 4.2 \$422.00 ComEd PA Last 4 digits of account number 888X Nonpriority Creditor's Name 3 Lincoln Center When was the debt incurred? 10/2013 Attn: Bkcy Group-Claims Dept Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility bill ☐ Yes 4.3 **Dish Network PA** Last 4 digits of account number 1564 \$326.00 Nonpriority Creditor's Name PO Box 94063 When was the debt incurred? 02/2015 Palatine, IL 60094-4063 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility bill ☐ Yes Portfolio Recovery Ass PA \$620.00 4.4 Last 4 digits of account number 1344 Nonpriority Creditor's Name 120 Corporte Blvd, Ste 100 When was the debt incurred? 03/2015 Norfolk, VA 23502 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection account for HSBC credit card ☐ Yes

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 20 of 47

Debtor 1 Crystal G Madrid Case number (if know) 4.5 Portfolio Recovery Ass PA \$508.00 Last 4 digits of account number 7477 Nonpriority Creditor's Name 120 Corporte Blvd, Ste 100 When was the debt incurred? 04/2015 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection account for HSBC credit card ☐ Yes 4.6 Portfolio Recovery Ass PA Last 4 digits of account number 2284 \$2,352.00 Nonpriority Creditor's Name 120 Corporte Blvd, Ste 100 When was the debt incurred? 12/2014 Norfolk, VA 23502 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection account for World credit card 4.7 Portfolio Recovery Ass PA Last 4 digits of account number 0339 \$682.00 Nonpriority Creditor's Name 120 Corporte Blvd, Ste 100 When was the debt incurred? 12/2014 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection account for World credit card ☐ Yes

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 21 of 47
Case number (if know)

| DCDIO | Crystal G Mauriu | | Case Harriber (II know) | |
|-------|-------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------|-------------|
| 4.8 | Presence Resurrection Med Ctr PA | Last 4 digits of account number | 610X | \$311.00 |
| | Nonpriority Creditor's Name 62221 Collection Center Dr | When was the debt incurred? | 06/2015 | |
| | Chicago, IL 60693-0622 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you file, the claim | э. Опеск ан шас арргу | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharir | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Medical bil | | |
| | | | | |
| 4.9 | Synchrony Bank / HH Gregg CC PA Nonpriority Creditor's Name | Last 4 digits of account number | 2710 | \$48.00 |
| | PO Box 965061 | When was the debt incurred? | 01/2012 - 05/2016 | |
| | Orlando, FL 32896-5061 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharir | a plane, and other similar debts | |
| | | · | | |
| | Yes | Other. Specify Credit card | DIII | |
| 4.1 | TD Auto Finance PA | Last 4 digits of account number | 0026 | \$14,547.00 |
| | Nonpriority Creditor's Name PO Box 16035 | When was the debt incurred? | 02/2012 | |
| | Lewiston, ME 04243-9517 | when was the debt incurred? | 02/2012 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharir | o plans, and other similar debts | |
| | - NO | · | | |
| | Yes | | deficiency balance for 2009 56 reposessed in 2012. | |

| | | | | Document | Page 22 | 2 of 47 | 7 | | Civialii | |
|--------------------|------------------------------|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------|------------|-------------|------------------------------|--------------|--------------|
| Debtor | ¹ Crysta | ıl G | Madrid | | - | Case no | ımber (i | if know) | | |
| 4.1 | • | | elrose Park | Last 4 digits of acco | ount number | 7468 | | | | \$700.00 |
| | Nonpriority 1000 N 2 | 5th | Ave | When was the debt | incurred? | | | | | |
| | | | k, IL 60160 | Ac of the date you fi | la tha alaim i | e. Chaal | all that a | nnlı | | |
| | | | City State Zlp Code he debt? Check one. | As of the date you fi | ie, the claim i | s: Check | ali triat a | ppiy | | |
| | ■ Debtor 1 | | | П о | | | | | | |
| | | | | Contingent | | | | | | |
| | ☐ Debtor 2 | | | ☐ Unliquidated | | | | | | |
| | | | Debtor 2 only | ☐ Disputed Type of NONPRIORI | TV uneocuros | l claim: | | | | |
| | | | of the debtors and another | Student loans | i i unsecured | i Ciaiiii. | | | | |
| | ☐ Check i | f this | s claim is for a community | _ | | | | P. C. Marker B. L. A. | | |
| | | n suk | ject to offset? | report as priority clain | | ration agr | eement (| or divorce that you did not | | |
| | ■ No | | • | ☐ Debts to pension of | | g plans, a | nd other | similar debts | | |
| | ☐ Yes | | | Other. Specify | ickets | | | | | |
| | | | | | | | | | | |
| 4.1 | Wright C | | • | Last 4 digits of acco | unt number | 7468 | | | | \$1,063.00 |
| | Nonpriority 4300 N N Chicago | larr | agansett, Room A128 | When was the debt | incurred? | 2016 | | | | |
| - | | | City State ZIp Code | As of the date you fi | le, the claim i | s: Check | all that a | pply | | |
| | Who incurr | red tl | he debt? Check one. | | | | | | | |
| | Debtor 1 | 1 only | / | ☐ Contingent | | | | | | |
| | Debtor 2 | 2 only | / | ☐ Unliquidated | | | | | | |
| | Debtor 1 | 1 and | Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least | one (| of the debtors and another | Type of NONPRIORI | TY unsecured | l claim: | | | | |
| | ☐ Check i | f this | s claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the clain | n suk | pject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | ■ No | | | Debts to pension | or profit-sharing | g plans, a | nd other | similar debts | | |
| | ☐ Yes | | | Other. Specify | uition | | | | | |
| | | | | | | | | | | |
| Part 3: | List Otl | hers | to Be Notified About a Debt | That You Already Lis | sted | | | | | |
| is tryii have r | ng to collect more than o | t from | ou have others to be notified abo n you for a debt you owe to some reditor for any of the debts that yo in Parts 1 or 2, do not fill out or s | one else, list the origin ou listed in Parts 1 or 2 | nal creditor in | Parts 1 c | r 2, ther | n list the collection agency | here. Simila | arly, if you |
| Part 4: | Add the | e An | nounts for Each Type of Unse | cured Claim | | | | | | |
| | the amounts of unsecured | | certain types of unsecured claims im. | . This information is fo | or statistical re | porting p | ourpose | s only. 28 U.S.C. §159. Add | the amoun | ts for each |
| | | • | Bd | | | • | | Total Claim | | |
| 7 | Total | 6a. | Domestic support obligations | | | 6a. | \$ | 0.00 | | |
| cla | aims | | | | | | | | | |
| from P | | 6b. | Taxes and certain other debts yo | _ | | 6b. | \$ | 0.00 | | |
| | | 6c. 6d. | Claims for death or personal inju | • | | 6c. 6d. | \$ | 0.00 | | |
| | | ou. | Other. Add all other priority unsecu | areu ciaims. Wille mat al | mount nere. | ou. | \$ | 0.00 | | |
| | | 6e. | Total Priority. Add lines 6a throug | h 6d. | | 6e. | \$ | 0.00 | | |

Total claims from Part 2

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Student loans

6f.

6h.

Total Claim

0.00

0.00

0.00

6f.

6g.

6h.

Entered 06/25/16 20:22:17 Desc Main Case 16-20721 Doc 1 Filed 06/25/16 Page 23 of 47 Case number (if know) Document

Debtor 1 Crystal G Madrid

Other. Add all other nonpriority unsecured claims. Write that amount 6i. 22,114.00 here. Total Nonpriority. Add lines 6f through 6i. 6j. 22,114.00

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

| | | I A A A A A A A A A A A A A A A A A A A | 111111111111111111111111111111111111 | |
|-----------------------------------------|-------------------------|-----------------------------------------|--------------------------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Crystal G Madrid | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|-------------------------------------------------------|-------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | City | | State | Zii Code | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.5 | , | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | | | | | · |

| | | Docume | ent Page 25 c | NT 4/ | |
|---------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Fill in this info | ormation to identify your | | | | |
| Debtor 1 | Crystal G Madrid | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| 0 1 | | | | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | orm 106H e H: Your Cod | ebtors | | | 12/15 |
| people are filir fill it out, and r your name and | ng together, both are equ | ally responsible for supp boxes on the left. Attach . Answer every question | olying correct informat n the Additional Page t | ion. If more space is ne o this page. On the top | e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write |
| Arizona, C ■ No. Go □ Yes. Di 3. In Columnin line 2 a | California, Idaho, Louisiana, to line 3. d your spouse, former spou n 1, list all of your codebt gain as a codebtor only i D), Schedule E/F (Official | Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran | erto Rico, Texas, Washi e with you at the time? spouse as a codebtor tor or cosigner. Make | ington, and Wisconsin.) if your spouse is filing sure you have listed the | with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill |
| | umn 1: Your codebtor e, Number, Street, City, State and ZI | P Code | | Column 2: The crec Check all schedules | litor to whom you owe the debt |
| Name Numb | | State | ZIP Code | ☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G, line☐ | ne |
| 3.2 Name | e | | | _ ☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G, line☐ | ne |
| Numl City | ber Street | State | ZIP Code | _ | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 26 of 47

| | | | | | | | _ | | | | | |
|-------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------|---------------------------|-------|-------|--------------|-------------|-----------------------------|----------|-------------|-------|
| | in this information to identify your optor 1 Crystal G N | | | | | | | | | | | |
| Dei | otor 1 Crystal G N | iadrid | | | | _ | | | | | | |
| | otor 2 ouse, if filing) | | | | | _ | | | | | | |
| Uni | ted States Bankruptcy Court for th | e: NORTHERN DISTRIC | CT OF ILLINO | IS | | | | | | | | |
| | se number | | - | | | | Check | if this is: | | | | |
| (If kr | nown) | | | | | | | amende | . 3 | | | |
| | | | | | | | | | ent showing as of the fo | | | pter |
| 0 | fficial Form 106I | | | | | | M | M / DD/ Y | YYY | | | |
| S | chedule I: Your Inc | ome | | | | | | | | | | 12/15 |
| atta Par | use. If you are separated and yo ch a separate sheet to this form. The describe Employment Fill in your employment | On the top of any additi | | | | | | | | | | |
| 1. | information. | | Debtor 1 | | | | | Debtor 2 | or non-fil | ing spo | use | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employe | ed | | | | ☐ Emplo | - | | | |
| | information about additional employers. | | ☐ Not employed | | | | ☐ Not e | mployed | | | | |
| | . , | Occupation | Uber Driver | | | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Self Empl | Self Employed 1099 Driver | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 5217 W C Chicago, | ornelia, Bs IL 60641 | smt | Apt | t | | | | | |
| | | How long employed to | here? 2 | years | | | | _ | | | | _ |
| Par | Give Details About Mo | nthly Income | | | | | | | | | | |
| | mate monthly income as of the ouse unless you are separated. | date you file this form. If | you have noth | ing to report | for a | any I | line, write | \$0 in the | space. Incl | lude you | r non-filir | ng |
| | u or your non-filing spouse have me space, attach a separate sheet to | | ombine the info | ormation for | all e | mplo | oyers for th | nat perso | n on the lin | es belov | v. If you | need |
| | | | | | | | For Debt | tor 1 | For Deb | | | |
| 2. | List monthly gross wages, saldeductions). If not paid monthly, | | | | 2. | \$ | | 0.00 | \$ | ١ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | | 3. | +\$ | | 0.00 | +\$ | N | N/A | |

0.00

N/A

Calculate gross Income. Add line 2 + line 3.

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 27 of 47

| Deb | tor 1 | Crystal G Madrid | _ | Case | number (if known) | | | |
|-----|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|-------------------|------|----------------------------|---------|
| | | | | Foi | r Debtor 1 | | ebtor 2 or iling spouse | |
| | Cop | y line 4 here | 4. | \$ | 0.00 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$_ \$ | 0.00 | \$ | N/A N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$_ | 0.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$_ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | · \$_ | 0.00 | + > | N/A | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 0.00 | \$ | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 0.00 | \$ | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$_ | 148.46 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 400.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$_ | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: LINK (Public Benefits) | e 8f. | \$_ | 511.00 | \$ | N/A | |
| | | 1/12 Earned Income & Child Tax Credit | | \$ | 148.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | - \$ | 0.00 | + \$ | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,207.46 | \$ | N/A | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 1,207.46 + \$_ | | N/A = \$1 | ,207.46 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depen | | • | | hedule J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies | | | | | 12. \$ 1 | ,207.46 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form | 1? | | | | Combine monthly i | |
| | | No. | | | | | | 1 |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 28 of 47

United States Bankruptcy Court Northern District of Illinois

| | N | orthern District of Illinois | | | |
|-------|-------------------------------------------------------|----------------------------------------|--------------------|--------------------|-------------------------|
| In re | Crystal G Madrid | | Case N | | |
| | | Debtor(s) | Chapt | er <u>7</u> | |
| | RUSINESS | S INCOME AND EXI | PENSES | | |
| т | | | | | 4.1. |
| | FINANCIAL REVIEW OF THE DEBTOR'S B | | DE information dif | ectly related to t | ne business operation.) |
| PART | A - GROSS BUSINESS INCOME FOR PREV | IOUS 12 MONTHS: | d. | | |
| | 1. Gross Income For 12 Months Prior to Filing: | | \$ | 0.00 | - |
| PART | B - ESTIMATED AVERAGE FUTURE GRO | SS MONTHLY INCOME: | | | |
| | 2. Gross Monthly Income | | | \$ | 208.12 |
| PART | C - ESTIMATED FUTURE MONTHLY EXP | ENSES: | | | |
| | 3. Net Employee Payroll (Other Than Debtor) | | \$ | 0.00 | = |
| | 4. Payroll Taxes | | | 0.00 | - |
| | 5. Unemployment Taxes | | | 0.00 | _ |
| | 6. Worker's Compensation | | | 0.00 | - |
| | 7. Other Taxes | | | 0.00 | _ |
| | 8. Inventory Purchases (Including raw materials) | | | 0.00 | _ |
| | 9. Purchase of Feed/Fertilizer/Seed/Spray | | | 0.00 | _ |
| | 10. Rent (Other than debtor's principal residence) | | | 0.00 | _ |
| | 11. Utilities | | | 0.00 | _ |
| | 12. Office Expenses and Supplies | | | 0.00 | _ |
| | 13. Repairs and Maintenance | | | 0.00 | _ |
| | 14. Vehicle Expenses | | | 59.66 | _ |
| | 15. Travel and Entertainment | | | 0.00 | _ |
| | 16. Equipment Rental and Leases | | | 0.00 | _ |
| | 17. Legal/Accounting/Other Professional Fees | | | 0.00 | _ |
| | 18. Insurance | | | 0.00 | _ |
| | 19. Employee Benefits (e.g., pension, medical, etc.) | | | 0.00 | |
| | 20. Payments to Be Made Directly By Debtor to Secured | Creditors For Pre-Petition Business De | bts (Specify): | | - |
| | DESCRIPTION | TO | ΓAL | | |
| | 21. Other (Specify): | | | | |
| | DESCRIPTION | TO | ΓΑΙ | | |

22. Total Monthly Expenses (Add items 3-21)

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2)

59.66

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 29 of 47

| Debtor 1 Crystal G Madrid Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Official Form 106J | Fill iz | n this information to identify your | case. | | 1 | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|----------------------|---------------|-------------------|----------------------|
| Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 invertile Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents? Do not state the dependents names. Child 2 Yes. Child 12 Yes. Child 12 Yes. No No Yes No No Yes Stimate Your Ongoing Monthly Expenses Estimate your cepenses of your bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable data. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106J.). The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. | | | | | | | |
| Debtor 2 (Spouse, if filing) | Debto | or 1 Crystal G Madr | id | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ((If known)) Case number ((If known) | Debto | or 2 | | | | A supplement show | |
| Official Form 106J Schedule J: Your Expenses 12 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part : Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Pyes. Fill out this information for Debtor 1. Do not state the dependent shames. Child 2 Yes Child 12 Yes No Ves 3. Do your expenses include expenses of people other than yourself and your dependents? Yes Tail 2 Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the Value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. S 0.00 | (Spot | use, if filing) | | | | 13 expenses as of | the following date: |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part : Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Go to line 2. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Pyes. Fill out this information for each dependent and pebtor 2. Do not state the dependents names. Child 2 Pyes No Yes No Child 12 Pyes No Yes No Yes Include and your dependents names. Part : Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the Value of such assistance and have included it on Schedule I: Your Income Your expenses 4. \$ | Unite | ed States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLIN | OIS | _ | MM / DD / YYYY | |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Dees Debtor 2 live in a separate household? No On this Debtor 1 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents and the dependent | Case | number | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: | (If kn | own) | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: | Off | ficial Form 106J | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Port 1: | | | - (nenses | | | | 12/1 |
| 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Oo not list Debtor 1 and Debtor 2. Do not state the dependents names. Child 2 Dependent's relationship to Debtor 1 and Debtor 2. Child 12 Yes. Child 12 Yes. No Child 12 Yes. No Child 12 Yes. No Yes. No Yes. No Yes. No Child 12 Yes. No No Yes. No No Yes. No | Be a infor | as complete and accurate as po rmation. If more space is neede aber (if known). Answer every q | ossible. If two married people ared, attach another sheet to this fluestion. | | | | or supplying correct |
| No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Child 2 Pyes Child 12 Pyes No Child 12 Pyes No No Yes Sill out this information for Debtor 2 bettor 1 or Debtor 2. Do not state the dependents names. Child 12 Pyes No Yes No Yes Sill out this information for Debtor 1 or Debtor 2 bettor 1 or Debtor 2. Do not state the dependents names. Child 12 Pyes No Yes No Yes Sill out this information for Debtor 2 bettor 1 or Debtor | | | ld | | | | |
| Yes. Does Debtor 2 live in a separate household? No | ١. | _ | | | | | |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? | | _ | separate household? | | | | |
| 2. Do you have dependents? | | □ No | • | | | | |
| Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Child 2 | | ☐ Yes. Debtor 2 must fil | le Official Form 106J-2, Expenses | for Separate House | ehold of Debt | or 2. | |
| Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Child 2 | 2. | Do you have dependents? |] No | | | | |
| Child 2 | | Do not list Debtor 1 and | Yes Fill out this information for | | | • | |
| Child 12 Yes No Yes No Yes No Yes Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ | | Do not state the | | | | | □ No |
| Child 12 | | dependents names. | | Child | | 2 | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 9 No 9 Yes 10 No 9 Yes 11 No 9 Yes 12 Sestimate Your Ongoing Monthly Expenses 13 Case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. 10 No 9 Yes 10 No 9 Yes 11 Yes 12 Sestimate Your Ongoing Monthly Expenses 13 Case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. 11 Your expenses 12 Sestimate Your Ongoing Monthly Expenses 13 Case to report expense as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. 12 Sestimate Your Ongoing Monthly Expenses 13 Case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses for your expenses. | | | | Child | | 12 | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 | | | | Cilila | | 12 | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106i.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 9. No 9 Yes | | | | | | | — · · · · |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 9.000 | | | | | | | |
| expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ | | | | | | | ☐ Yes |
| Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ | - | expenses of people other than | 1 | | | | |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 0.00 | Estir | mate your expenses as of your enses as of a date after the ban | bankruptcy filing date unless y | | | | |
| payments and any rent for the ground or lot. 4. \$ 0.00 | the \ | value of such assistance and h | | | | Your expe | enses |
| If not included in line 4: | 4. | | | nclude first mortgag | e 4. \$ | | 0.00 |
| | | If not included in line 4: | | | | | |
| 4a. Real estate taxes 4a. \$ 0.00 | | 4a. Real estate taxes | | | 4a. \$ | | 0.00 |
| 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 | | 4b. Property, homeowner's, o | r renter's insurance | | 4b. \$ | | |
| 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 25.00 | | · · · · · · · · · · · · · · · · · · · | | | | | |
| 4d. Homeowner's association or condominium dues 4d. \$ 0.00 Additional mortgage payments for your residence, such as home equity loans 5 \$ 0.00 | _ | | | and a modern to | | | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 30 of 47

| Debtor 1 | Crystal | G Madrid | Case num | ber (if known) | |
|---------------|-------------------------------|-----------------------------------------------------------------------------------|---------------|---------------------------------------|-----------------------|
| 6. Uti | lities: | | | | |
| 6a. | | , heat, natural gas | 6a. | \$ | 0.00 |
| 6b. | • | ewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | · | 45.00 |
| 6d. | • | | 6d. | · | 0.00 |
| | | sekeeping supplies | 7. | · | 800.00 |
| | | children's education costs | 8. | \$ | |
| _ | | | o. 9. | \$ | 12.50 |
| | - | dry, and dry cleaning | | · - | 150.00 |
| | | products and services | 10. | · | 50.00 |
| | | ental expenses | 11. | \$ | 50.00 |
| | | Include gas, maintenance, bus or train fare. car payments. | 12. | \$ | 87.00 |
| | | clubs, recreation, newspapers, magazines, and books | 13. | · | 100.00 |
| | | tributions and religious donations | 14. | | 0.00 |
| | aritable con surance. | inbutions and religious domations | 14. | Ψ | 0.00 |
| | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | a. Life insura | | 15a. | \$ | 15.00 |
| | b. Health ins | | 15b. | · | 0.00 |
| _ | c. Vehicle in | | 15c. | · | 89.44 |
| | | urance. Specify: | 15d. | | 0.00 |
| | | nclude taxes deducted from your pay or included in lines 4 or 20. | | Ψ | 0.00 |
| _ | ecify: | notice taxes deducted from your pay of included in lines 4 of 20. | 16. | \$ | 0.00 |
| | | lease payments: | | · — | |
| | | nents for Vehicle 1 | 17a. | \$ | 0.00 |
| 17 | o. Carpaym | nents for Vehicle 2 | 17b. | \$ | 0.00 |
| | c. Other. Sp | | 17c. | \$ | 0.00 |
| | d. Other Sp | · · · | 17d. | · · · · · · · · · · · · · · · · · · · | 0.00 |
| | | s of alimony, maintenance, and support that you did not report as | | | |
| | | your pay on line 5, Schedule I, Your Income (Official Form 106l). | | \$ | 0.00 |
| | | s you make to support others who do not live with you. | | \$ | 0.00 |
| Sp | ecify: | | 19. | - | |
| | | perty expenses not included in lines 4 or 5 of this form or on Scho | | | |
| 208 | a. Mortgage | s on other property | 20a. | \$ | 0.00 |
| 20l | Real esta | te taxes | 20b. | \$ | 0.00 |
| 200 | c. Property, | homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 200 | d. Maintena | nce, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 206 | e. Homeowr | ner's association or condominium dues | 20e. | \$ | 0.00 |
| i. Otl | her: Specify: | | 21. | +\$ | 0.00 |
| | | | | , | |
| | • | monthly expenses | | | _ |
| | a. Add lines 4 | 9 | | \$ | 1,423.94 |
| 22 | o. Copy line 2 | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 220 | c. Add line 22 | 2a and 22b. The result is your monthly expenses. | | \$ | 1,423.94 |
| 2 ^- | loulate ver- | monthly not income | | | |
| | • | monthly net income. | 006 | ¢ | 4 007 40 |
| | | 12 (your combined monthly income) from Schedule I. | 23a. | | 1,207.46 |
| 231 | o. Copy you | r monthly expenses from line 22c above. | 23b. | -Ф | 1,423.94 |
| 22, | - Subtract | your monthly expenses from your monthly income. | | | |
| 230 | | t is your <i>monthly net income</i> . | 23c. | \$ | -216.48 |
| | 5 10001 | , | | μ | |
| | | an increase or decrease in your expenses within the year after you | | | |
| | | ou expect to finish paying for your car loan within the year or do you expect you | ır mortgage ı | payment to increase | or decrease because o |
| | | e terms of your mortgage? | | | |
| | No. | | | | |
| | Yes. | Explain here: | | | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 31 of 47

| Fill in this inf | ormation to identify your | case: | | |
|---------------------|------------------------------------------------------------|---------------------------|-------------------------------------------------|----------------------------------|
| Debtor 1 | Crystal G Madrid | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | rm 106Dec | | | |
| | | n Individual | Dobtorio Sobodulos | |
| Declara | ation About a | in individual | Debtor's Schedules | 12/15 |
| If two married | neonle are filing togethe | r hoth are equally respo | ensible for supplying correct information. | |
| ii two iiiaiiieu | people are filling together | i, both are equally respo | misible for supplying correct information. | |
| | - | | s or amended schedules. Making a false stat | |
| • | ney or property by fraud in . 18 U.S.C. §§ 152, 1341, 1 | | kruptcy case can result in fines up to \$250,00 | 00, or imprisonment for up to 20 |
| years, or botti | . 16 0.3.6. 99 132, 1341, 1 | 519, and 5571. | | |
| | | | | |
| S | ign Below | | | |
| | - | | | |

■ No

☐ Yes. Name of person Attach Bankruptcy Petition Preparer's Notice,
Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Crystal G Madrid
Crystal G Madrid
Signature of Debtor 1

Signature of Debtor 2

Date

Official Form 106Dec

Date **June 25, 2016**

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 32 of 47

| | | nation to identify you | | | | | | | | |
|---------------------|----------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------|--|--|--|--|
| Del | btor 1 | Crystal G Madrid | Middle Name | Last Name | | | | | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Uni | ited States Bar | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | | | | | |
| | se number | | | | _ | Check if this is an | | | | |
| Sta Be a info | as complete a | of Financial | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup additional pages, write yo | | | | | |
| | <u> </u> | , | nrital Status and Where You | ı Lived Before | | | | | | |
| 1. | What is your | current marital statu | ıs? | | | | | | | |
| | ☐ Married ■ Not married | ried | | | | | | | | |
| 2. | During the la | uring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>'</i> . | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | | |
| 3. state | | | | | ity property state or territor co, Texas, Washington and V | | | | | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | | |
| Pai | rt 2 Explain | n the Sources of You | r Income | | | | | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? | | | | |
| | □ No ■ Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$809.98 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | |

Official Form 107

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Page 33 of 47 Case number (if known) Document

Debtor 1 Crystal G Madrid

| | Debtor 1 | | Debtor 2 | |
|------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|--------------------------------------------|-------------------------------------------------------|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$4,465.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$784.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| | | | | |

Did you receive any other income during this year or the two previous calendar years?

Debtor 1

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

Debtor 2

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

| | Deptor i | | Deptor 2 | |
|-------------------------------------------------------------------------|--------------------------------------------------|------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | LINK (Public Benefits) | \$3,066.00 | | |
| | Child Support | \$1,600.00 | | |
| | Early Distribution from Retirement Account | \$3,000.00 | | |
| For last calendar year: (January 1 to December 31, 2015) | LINK (Public Benefits) | \$5,583.00 | | |
| | Child Support | \$4,800.00 | | |
| For the calendar year before that: (January 1 to December 31, 2014) | LINK (Public Benefits) | \$5,400.00 | | |
| | Child Support | \$4,800.00 | | |
| | Early Distribution from Retirement Account | \$3,000.00 | | |

List Certain Payments You Made Before You Filed for Bankruptcy

| э. | Are eitner | Deptor 1 | s or | Deptor | 2'5 | aepts | primarily | consumer | aepts? |
|----|------------|----------|------|--------|-----|-------|-----------|----------|--------|
| | | | | | | | | | |

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you Statement of Financial Affairs for Individuals Filing for Bankruptcy page 2 Official Form 107

Page 34 of 47 Case number (if known) Document Debtor 1 Crystal G Madrid

| | | o not include payments for d | | gations, such as c | hild support and ali | imony. Also, do |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|---------------------------------------------------|----------------------|------------------------------------------|----------------------|
| | * Subject to adjustment on 4/01 | /19 and every 3 years after t | that for cases filed on | or after the date | of adjustment. | |
| | Yes. Debtor 1 or Debtor 2 or both h During the 90 days before you fi | | | al of \$600 or more | ? | |
| | ■ No. Go to line 7. | | | | | |
| | | ditor to whom you paid a tota or domestic support obligation kruptcy case. | | | | |
| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payme | ent for |
| 7. | Within 1 year before you filed for bankrup Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. | partners; relatives of any ger in control, or owner of 20% of | neral partners; partne or more of their voting | erships of which you | ou are a general pa Iny managing agen | it, including one fo |
| | Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount Amount y | | Reason for this | payment |
| | Father | Previous 12 months | \$990.00 | \$0.00 | Repayment o loan | f personal |
| | Include payments on debts guaranteed or c ■ No □ Yes. List all payments to an insider | osigned by an insider. | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this Include creditor | |
| Pai | rt 4: Identify Legal Actions, Repossessi | ions, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankru List all such matters, including personal inju modifications, and contract disputes. | | | | | |
| | NoYes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the ca | ase |
| | Portfolio Recovery Ass v. Crystal Madrid 16 M1 112005 | Collection suit | Circuit Court o County, IL | f Cook | ■ Pending □ On appeal □ Concluded | |
| 10. | Within 1 year before you filed for bankrul Check all that apply and fill in the details be | | erty repossessed, f | oreclosed, garni | shed, attached, se | eized, or levied? |
| | No. Go to line 11. Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |

Explain what happened

property

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Page 35 of 47
Case number (if known) Document Debtor 1 Crystal G Madrid 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Law Offices of Robert J Skowronski, **Attorney Fees** 2016 \$175.00 Ltd

5491 N. Milwaukee Ave Chicago, IL 60630

rbskowronski@gmail.com

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Debtor 1 Crystal G Madrid Page 36 of 47 Case number (if known)

| 17. | Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that you No Yes. Fill in the details. | ors or to make paymen | | | or transfer any prop | erty to anyone who | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|---------------------------------------------------------|------------------|---------------------------------------------------------|-----------------------------------------------|--|--|
| | Person Who Was Paid Description and value of any property Address Date payment transferred or transfer was made | | | | | | | |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details. | usiness or financial at ade as security (such as | ffairs? s the granting of a | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and property transfe | | | any property or s received or debts schange | Date transfer was made | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details. | | any property to a | self-settled tr | ust or similar device | of which you are a | | |
| | Name of trust | Description and | value of the pro | perty transfer | red | Date Transfer was made | | |
| Pai | t 8: List of Certain Financial Accounts, Ins | struments, Safe Depos | sit Boxes, and S | torage Units | | | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associon No Yes. Fill in the details. | or other financial acco | unts; certificates | s of deposit; sl | | , | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of acco | cle me | ate account was osed, sold, oved, or ansferred | Last balance before closing or transfer | | |
| | Principal Financail Group | XXXX- | ☐ Checking ☐ Savings ☐ Money Ma ☐ Brokerage ■ Other 401 | rket | 2/2016 | \$3,000.00 | | |
| | | | — Other 40 | <u>IK</u> | | | | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | year before you filed f | or bankruptcy, a | ny safe deposi | it box or other depo | sitory for securities, | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had an Address (Number State and ZIP Code) | ber, Street, City, | | | Do you still have it? | | |
| | | , , | | | | | | |

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Page 37 of 47 Case number (if known) Document Debtor 1 Crystal G Madrid

| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------|-----------------------|--|
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | |
| Par | 9: Identify Property You Hold or Control for | Someone Else | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any proper | ty you borrowed from, are storing fo | r, or hold in trust | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | |
| Par | 10: Give Details About Environmental Inform | nation | | | |
| For | he purpose of Part 10, the following definitions | s apply: | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su | air, land, soil, surface water, ground | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | • | aw, whether you now own, operate, | or utilize it or used | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | waste, hazardous substance, toxic | substance, | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of when | they occurred. | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | under or in violation of an environm | ental law? | |
| | No | | | | |
| | Yes. Fill in the details. | Covernmental visit | Fundamental law if you | Data of notice | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of any | y release of hazardous material? | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | |
| Par | 11: Give Details About Your Business or Co | nnections to Any Business | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have an | y of the following connections to an | y business? | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | |
| | ☐ A member of a limited liability company | y (LLC) or limited liability partnershi | ip (LLP) | | |
| Offic | al Form 107 Statement | of Financial Affairs for Individuals Filing | for Bankruptcy | page | |

Entered 06/25/16 20:22:17 Case 16-20721 Doc 1 Filed 06/25/16 Page 38 of 47
Case number (if known) Document Debtor 1 Crystal G Madrid ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Crystal G Madrid Signature of Debtor 2 **Crystal G Madrid** Signature of Debtor 1 Date June 25, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 39 of 47

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------|------------------------------------|
| Debtor 1 | Crystal G Madrid | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |
| Official Fo | | n for Individu | uals Filing Under Chap | ter 7 12/15 |
| If you are an ind | lividual filing under cha | pter 7, you must fill out | this form if: | |
| creditors have | e claims secured by yo | ur property, or | | |
| You must file th | is form with the court w ever is earlier, unless th | | pired. ile your bankruptcy petition or by the date e for cause. You must also send copies to | |
| If two married n | eonle are filing togethe | r in a joint case, both are | e equally responsible for supplying correct | t information Both debtors must |

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|-----------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------|
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 40 of 47

| Debtor 1 | Crystal G Madrid | Case number (if known) | |
|---------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| name: Descrip property securin | у | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| For any ur in the info | rmation below. Do not list real estate | erty Leases It you listed in Schedule G: Executory Contracts and Unexpired The leases are leases that are still in effect; the Earty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | lease period has not yet ended. |
| Describe | your unexpired personal property le | ases | Will the lease be assumed? |
| Lessor's n Descriptio Property: | name: on of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: on of leased | | □ No |
| Lessor's n Descriptio Property: | name: on of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: on of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: on of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: nn of leased | | □ No |
| Lessor's n Descriptio Property: | name: on of leased | | □ No |
| Under pen | Sign Below | ndicated my intention about any property of my estate that sec | |
| X /s/ C | hat is subject to an unexpired lease. Crystal G Madrid stal G Madrid ature of Debtor 1 | XSignature of Debtor 2 | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-20721 Doc 1 Filed 06/25/16 Entered 06/25/16 20:22:17 Desc Main Document Page 45 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Crystal G Madrid | | Case No. | | |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------|---------------------------------|-------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR DI | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the f be rendered on behalf of the debtor(s) in contemplation | iling of the petition in bankruptcy | , or agreed to be paid | to me, for services rendered of | r to |
| | For legal services, I have agreed to accept | | \$ | 1,500.00 | |
| | Prior to the filing of this statement I have received | | | 175.00 | |
| | Balance Due | | \$ | 1,325.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed co | mpensation with any other person | unless they are mem | bers and associates of my law | firm. |
| | ☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the | | | | A |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | |
| | a. Analysis of the debtor's financial situation, and rest b. Preparation and filing of any petition, schedules, s c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] See representation agreement | statement of affairs and plan which | h may be required; | | |
| 6. | By agreement with the debtor(s), the above-disclosed See representation agreement | fee does not include the following | g service: | | |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of bankruptcy proceeding. | any agreement or arrangement for | r payment to me for r | epresentation of the debtor(s) | in |
| J | lune 25, 2016 | /s/ Robert J Skov | wronski | | |
| Ī | Date | Robert J Skowro | nski 6290776 | | |
| | | Signature of Attorna Law Offices of R | <i>ey</i> .obert J Skowrons | ki. Ltd | |
| | | 5491 N. Milwauk | ee Ave | , | |
| | | Chicago, IL 6063 (773) 283-1600 F | i0 Fax: (773) 337-984 |) | |
| | | rbskowronski@d | · , | • | |

Name of law firm

United States Bankruptcy Court Northern District of Illinois

| In re | Crystal G Madrid | | Case No. | |
|-------|--------------------------------------------|----------------------------------------|------------------------------|----------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR M | MATRIX | |
| | | Number of | f Creditors: | 26 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | itors is true and correct to | the best of my |
| Date: | June 25, 2016 | /s/ Crystal G Madrid Crystal G Madrid | | |

Blitt & Gaine (248) 16-20721 Doc 1 661 Glenn Ave Wheeling, IL 60090

Eilendr 06/25/16 In Entered 06/25/16 20: 22: #7110 Rescue Mains PA 1849CUMPRITHWAY PORGES 47 Of 47 120 Corporte Blvd, Ste 100 Kalispell, MT 59901-5721

Norfolk, VA 23502

Contract Callers Inc PO Box 2207 Augusta, GA 30903-2207

Stellar Recovery Inc PA 1327 Highway 2 West, Ste 100 Kalispell, MT 59901

Presence Resurrection Med Ctr PA 62221 Collection Center Dr Chicago, IL 60693-0622

Contract Callers PA 501 Greene Street, 3rd Fl, Ste 302 Augusta, GA 30901

SYNCB / HH Gregg CC PO Box 960061 Orlando, FL 32896-0061

Synchrony Bank / HH Gregg CC P PO Box 965061 Orlando, FL 32896-5061

Convergent Outsourcing INC PO Box 9004 Renton, WA 98057-9004

SYNCB / HH Gregg CC PO Box 965036 Orlando, FL 32896-5036

TD Auto Finance PA PO Box 16035 Lewiston, ME 04243-9517

Convergent Outsourcing Inc PA 800 SW 39th Street Renton, WA 98057

TD Auto Finance PO Box 9223 Farmington, MI 48333-9223 Village of Melrose Park 1000 N 25th Ave Melrose Park, IL 60160

Creditors Collection PA PO Box 63 Kankakee, IL 60901-0063 TD Auto Finance PO Box 1622 Roanoke, TX 76262 Wright College 4300 N Narragansett, Room A128 Chicago, IL 60634

Dish Network PO Box 9040 Littleton, CO 80120-9040 Wright College 4300 Chicago, IL 60634

Portfolio Recovery Ass PO Box 12914 Norfolk, VA 23541-1223

Comcast PA PO Box 3002 Southeastern, PA 19398-3002

Portfolio Recovery Associates LLC C/O IL Corp Services C 801 Adlai Stevenson Drive Springfield, IL 62703

ComEd PA 3 Lincoln Center Attn: Bkcy Group-Claims Dept Villa Park, IL 60181

Presence Resurrection Med Center 621 17th Street, Ste 1800 Denver, CO 80293

Dish Network PA PO Box 94063 Palatine, IL 60094-4063